

Child Survival and Health Grants Program Project Summary

Nov-01-2005

Concern Worldwide Incorporated (Rwanda)

General Project Information:

Cooperative Agreement Number: HFP-A-00-01-00044-00
Project Grant Cycle: 17
Project Dates: (9/30/2001 - 9/30/2006)
Project Type: Standard

CWI HQ Backstop: Siobhan Walsh

Field Program Manager Information:

Name: Marcie Rubardt
Address:

Phone:
E-mail:
Project Web Site: www.concern.net

Alternate Field Contact:

Name: Rose Luz
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Funding Information:

USAID Funding:(US \$): \$1,298,491 **PVO match:(US \$)** \$555,752

Project Information:

Description:

The program goal is to contribute to a sustainable reduction in maternal and child mortality and morbidity, and increased life expectancy in Kibilizi Health District, Butare Province. The interventions will include, STI/HIV/AIDS, malaria, nutrition, and maternal and newborn care. The four strategies employed are:

1. Networking and advocacy for gender equity at National/Provincial levels to gain support from all civil administrations towards a multi-sectoral response to the priority problems, especially HIV/AIDS.
2. To develop the management capacity of the DMO and supervisors via training, facilitation, coaching and participatory planning exercises and meetings.
3. Developing the technical capacity of the District Health staff on selected child health activities via training and workshops, on-the-job mentoring, and with the development of a staff support system.
4. Strengthening the District's community outreach approach through training, facilitation and supporting COSAs, TBAs and CHWs resulting in a community based health promotion initiative.

Project Partners:

District Health Management Team

General Strategies Planned:

Advocacy on Health Policy
Strengthen Decentralized Health System
Information System Technologies

M&E Assessment Strategies:

KPC Survey
Health Facility Assessment
Organizational Capacity Assessment with Local Partners
Organizational Capacity Assessment for your own PVO
Participatory Rapid Appraisal
Participatory Learning in Action
Appreciative Inquiry-based Strategy
Participatory Evaluation Techniques (for mid-term or final evaluation)

Behavior Change & Communication (BCC) Strategies:

Mass Media
 Interpersonal Communication
 Peer Communication
 Support Groups

Groups targeted for Capacity Building:

PVO	Non-Govt Partners	Other Private Sector	Govt	Community
US HQ (CS unit) Field Office HQ CS Project Team	(None Selected)	Traditional Healers	National MOH Dist. Health System Health Facility Staff	Health CBOs Other CBOs CHWs

Interventions/Program Components:

Nutrition (22 %)

(CHW Training)

- Comp. Feed. from 6 mos.
- Hearth
- Cont. BF up to 24 mos.
- Growth Monitoring
- Maternal Nutrition

Malaria (22 %)

(CHW Training)

(HF Training)

- Training in Malaria CM
- Access to providers and drugs
- ITN (Bednets)
- IPT
- Community Treatment of Malaria

Maternal & Newborn Care (22 %)

(CHW Training)

(HF Training)

- Emerg. Obstet. Care
- Neonatal Tetanus
- Recog. of Danger signs
- Newborn Care
- Post partum Care
- Delay 1st preg Child Spacing
- Integr. with Iron & Folate
- Normal Delivery Care
- Birth Plans

- PMTCT of HIV
- Emergency Transport

HIV/AIDS (34 %)

- Treatment of STIs
- Behavior Change Strategy
- Access/Use of Condoms
- STI Treat. with Antenat. Visit
- ABC
- PMTCT
- Nutrition
- Home based care
- PLWHA
- HIV Testing

Target Beneficiaries:

Infants < 12 months:	6,998
Children 0-59 months:	34,839
Women 15-49 years:	33,469

Rapid Catch Indicators:

Indicator	Numerator	Denominator	Percentage	Confidence Interval
Percentage of children age 0-23 months who are underweight (-2 SD from the median weight-for-age, according to the WHO/NCHS reference population)	51	133	38.3%	8.3
Percentage of children age 0-23 months who were born at least 24 months after the previous surviving child	0	0	0.0%	0.0
Percentage of children age 0-23 months whose births were attended by skilled health personnel	37	133	27.8%	7.6

Percentage of mothers of children age 0-23 months who received at least two tetanus toxoid injections before the birth of their youngest child	90	132	68.2%	7.9
Percentage of infants age 0-5 months who were exclusively breastfed in the last 24 hours	0	0	0.0%	0.0
Percentage of infants age 6-9 months receiving breastmilk and complementary foods	61	71	85.9%	8.1
Percentage of children age 12-23 months who are fully vaccinated (against the five vaccine-preventable diseases) before the first birthday	96	133	72.2%	7.6
Percentage of children age 12-23 months who received a measles vaccine	96	133	72.2%	7.6
Percentage of children age 0-23 months who slept under an insecticide-treated bednet the previous night (in malaria-risk areas only)	56	266	21.1%	4.9
Percentage of mothers who know at least two signs of childhood illness that indicate the need for treatment	22	133	16.5%	6.3
Percentage of sick children age 0-23 months who received increased fluids and continued feeding during an illness in the past two weeks	0	0	0.0%	0.0
Percentage of mothers of children age 0-23 months who cite at least two known ways of reducing the risk of HIV infection	98	133	73.7%	7.5

Percentage of mothers of children age 0-23 months who wash their hands with soap/ash before food preparation, before feeding children, after defecation, and after attending to a child who has defecated	37	133	27.8%	7.6
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Comments for Rapid Catch Indicator

Marcie Rubardt is not the field contact. Confidence intervals estimated. Underweights for age group 12-23 months. Complementary feeding age group 6-11 months. Danger signs for severe malaria in addition to fever among WRA 15-49 years. HIV/AIDS protection knowledge among WRA 15-49 years. Handwashing with soap and water for at least one critical activity (not all 5).